## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE Commissioner for Patents

P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

maintenance fee notification	ons.						
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
	7590 05/04/2006			Ce	Certificate of Mailing or Transmission		
BOYLE FREDRICKSON NEWHOLM STEIN & GRATZ, S.C. 250 E. WISCONSIN AVENUE SUITE 1030 MILWAUKEE, WI 53202				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.  (Depositor's name)			
						(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED INVE		ENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/820,075	04/07/2004	Michael J. Masta		alir	335.891	7227	
TITLE OF INVENTION:	LECTERN						
APPLN. TYPE	SMALL ENTITY	ISSUE FE	Е	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$0	\$1400	08/04/2006	
EXAMINER		ART UNI	Т	CLASS-SUBCLASS			
IP, SHIK LUEN PAUL		2837	***************************************	318-280000	<b>-</b>		
1. Change of corresponden CFR 1.363).  Change of correspon Address form PTO/SB/  "Fee Address" indic PTO/SB/47; Rev 03-02 Number is required.	Correspondence	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to					
PLEASE NOTE: Unler recordation as set forth  (A) NAME OF ASSIGN	D RESIDENCE DATA TO B as an assignee is identified be in 37 CFR 3.11. Completion  NEE  LL Thtelwa  te assignee category or catego	elow, no assignee dof this form is NOT	lata will appear or a substitute for fil (B) RESIDENCE:	n the patent. If an assigning an assignment.  (CITY and STATE OR	country)		
4a. The following fee(s) ar  Hissue Fee  Publication Fee (No	small entity discount permitte	ed)	b. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-1170 (enclose an extra copy of this form).				
a. Applicant claims	s (from status indicated above SMALL ENTITY status. See	37 CFR 1.27.	* *		ALL ENTITY status. See 37 (		
NOTE: The Issue Fee and	D is requested to apply the Isso Publication Fee (if required) vecords of the United States Pate	will not be accepted	from anyone other	to re-apply any previous r than the applicant; a res	sly paid issue fee to the applic gistered attorney or agent; or	eation identified above. the assignee or other party in	
Authorized Signature _	Andreword	donell		Date	8/2/06		
Typed or printed name	Andrew 5.	McConn	e11_	Registration	No. 33,27	2	
an application. Confidentia submitting the completed this form and/or suggestion	ion is required by 37 CFR 1.3 ality is governed by 35 U.S.C application form to the USPT ns for reducing this burden, sl ginia 22313-1450. DO NOT 3-1450.	. 122 and 37 CFR 1 O. Time will vary of bould be sent to the	.14. This collection depending upon the Chief Information	n is estimated to take 12 le individual case. Any of Officer IIS Patent and	minutes to complete, include comments on the amount of the ITrademark Office, IJS, De-	ing gathering, preparing, and ime you require to complete partment of Commerce, P.O.	

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